

PHONE NUMBERS

Court
Sheriff's Department
Police Department
9-1-1

IN THE _____ COURT OF THE STATE OF MONTANA
COUNTY OF _____, _____.

_____)	No. _____
)	
Petitioner,)	PETITION FOR TEMPORARY
)	ORDER OF PROTECTION
v.)	AND REQUEST FOR HEARING
)	
_____)	
)	
Respondent.)	

Under oath and as provided by Mont. Code Ann., 40-15-201, I request that the Court issue a Temporary Order of Protection against Respondent. I believe I am in danger of harm if the court does not issue a Temporary Order of Protection immediately.

PERSONAL IDENTIFIERS

Petitioner:

Name: _____
Date of Birth: _____
Sex: _____
Race: _____

Respondent:

Fill out as much information as you can about Respondent. If you don't know all of the following information it will not affect your ability to get a Temporary Order of Protection.

Name: _____	Drivers License No.: _____
Sex: _____	State: _____
Race: _____	Exp. Date: _____
Height: _____	Veh. Make/Model: _____
Weight: _____	Color: _____
Hair Color: _____	Plate#: _____
Eye Color: _____	Scars/Marks/Tattoos: _____
*Date of Birth: _____	
*Social Security No.: _____	

*If you can provide either Respondent's date of birth or social security number, law enforcement will be able to enter your Temporary Order of Protection into the State's computer system. It is very helpful if you have this information. You can still receive a Temporary Order of Protection if you don't.

RESIDENCY

I, the above named Petitioner, live in _____ County, State of _____. Respondent lives in _____ County, State of _____.
The abuse happened in _____ County, State of _____.

RELATIONSHIP

To qualify for a Temporary Order of Protection, you must meet one of the descriptions listed below.

CIRCLE the description of your relationship with Respondent.

- A. We are married
- B. We were married, but are now separated
- C. We are divorced
- D. We are dating or having an ongoing intimate relationship
- E. We dated or had an ongoing intimate relationship
- F. We have a child and/or children together
- G. I am a family member or a former family member of Respondent
- H. Other. (None of the relationships listed in A-G are required if you were the victim of stalking, incest, sexual assault, or sexual intercourse without consent.)

DESCRIPTION OF ABUSE

To qualify for a Temporary Order of Protection, you must satisfy one of the situations described above and have been the victim of one or more of the types of abuse listed below.

- A. **PARTNER FAMILY MEMBER ASSAULT** - Respondent, who is my partner or a family member, caused bodily injury to me, used a weapon to cause bodily injury to me, or caused me to fear bodily injury.
- B. **ASSAULT** - Respondent caused bodily injury to me, had physical contact of an insulting or provoking nature, or caused me to fear bodily injury. (Assault can include use of a weapon against you.)
- C. **INTIMIDATION** - Respondent threatened me with physical harm or confinement, so I would obey him/her.
- D. **ENDANGERMENT** - Respondent created a risk of death or serious bodily injury to me.
- E. **KIDNAPPING/RESTRAINT** - Respondent held me against my will and interfered with my liberty.
- F. **ARSON** - Respondent burned my property or placed me in danger of death or bodily injury by fire or explosives.
- G. **INCEST** - I am a family member of Respondent and he/she had sexual contact with me.
- H. **SEXUAL ASSAULT** - Respondent had sexual contact with me without my consent.
- I. **SEXUAL INTERCOURSE WITHOUT CONSENT** - Respondent had sexual intercourse with me without my consent.
- J. **STALKING** - Respondent caused me emotional distress or fear of death or injury by repeatedly following me, harassing me or threatening me in person, by phone, by mail or some other method.
- K. **DELIBERATE HOMICIDE or MITIGATED DELIBERATE HOMICIDE** - Respondent killed my partner or family member.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

FIREARMS

List all firearms and other weapons currently possessed by Respondent:

CHILDREN

Complete this section if you have children.

Respondent and I are the parents of the following children (state each child's name, age, date of birth, and with whom the child now lives):

Name: Last, First	Age	DOB	Race	Sex	Lives With

The following children live with me but are not the Respondent's children:

Name: Last, First	Age	DOB	Race	Sex

* IF YOU ARE FILLING OUT THESE FORMS IN DISTRICT OR TRIBAL COURT, PLEASE COMPLETE APPENDIX A.

OTHER COURT CASES

If there are other court cases between you and the Respondent, list them here. If there is other information not covered in this form that you think the Judge should know, put it here.

CIRCLE any of the following statements that apply to you:

- A. A divorce, legal separation or custody case has been filed in _____ County, State of _____
- B. There are other court cases between Respondent and me. List nature of the case and where it is filed: _____

- C. A criminal charge of _____ was filed against Petitioner or Respondent in _____ court in _____ County.
- D. List any other cases pending against the Respondent that you are aware of: _____

REQUEST FOR RELIEF

Petitioner respectfully requests that this Court issue a Temporary Order of Protection containing the following (**CIRCLE** all of the provisions you want the court to include in your order):

- 1. Respondent is restrained from assaulting, threatening, abusing, harassing, following or stalking me. Respondent must not harass, annoy or disturb my peace or do any of those things to the following people (may include family members, witnesses to the offense or other victims of the offense):

_____.
- 2. Respondent must not threaten to commit or commit acts of violence against me or against these family members:

_____.

3. The following applies to my present residence:
- a. My current location is a secret and I want it to remain confidential.

-OR-

- b. Respondent must stay away from my residence at:

_____.

4. Respondent must stay 1500 feet or other appropriate distance (_____ feet) away from me: at my residence _____; at my place of work _____; at my place of school _____; other _____.
5. Respondent must not telephone, email, write, contact or otherwise communicate, directly or indirectly or through a third party, with me or the following people (may include family members, witnesses to the offense or other victims of the offense): _____.
6. Respondent must not take the following child(ren) out of this county: _____.
7. Respondent used or threatened me with a firearm. Respondent is prohibited from owning, possessing and/or purchasing a firearm.
8. Respondent must not take, hide, sell, damage or dispose of our/my property.
9. Respondent must give me possession or use of the following items (items may include the residence, automobile and other essential personal property regardless of ownership): _____.
10. I need a peace officer to come with me to pick up the property listed in Number 9, or I request that Respondent be accompanied by a peace officer when picking up his/her property or belongings.

11. The Court should order the following to provide for my safety and welfare, and my family's safety and welfare: _____
_____.
12. Other relief requested: _____

_____.

HEARING

Petitioner respectfully requests that the Court set a hearing on this case within 20 days as required by Mont. Code. Ann. § 40-15-202. The Respondent will then have a chance to be heard and explain why the Order of Protection should not be issued. I request that the Court issue an Order of Protection with the above listed protection after the hearing.

OTHER RELIEF

The Court should order other protection for me as it deems just and proper.

Petitioner

NOTARY SEAL OR JUDGE'S SIGNATURE

STATE OF MONTANA)
)
) **: ss.**
County of _____)

_____, the Petitioner, after having been sworn, states as follows:

That I have read the above Petition, know the contents, and that the statements are true of my own knowledge, except those stated upon information and belief, and I believe those to be true.

DATED this _____ day of _____, _____.

Petitioner

SUBSCRIBED AND SWORN to before me this ____ day of _____, _____.

Notary Public/Judge
My Commission Expires: _____

APPENDIX A

Complete this form if you are asking a district court for an order of protection and there are children for whom a temporary visitation schedule needs to be established.

If you and the Respondent have children together, the Judge will ask you and the Respondent how temporary visitation is to take place under safe and peaceful conditions. You must have a very good reason before the Judge will deny the Respondent visitation.

Visitation schedules generally provide for:

- exchanges that are made in public places;
- visits that take place on a regular basis;
- visits that vary in length depending on the age and attitudes of the children.

Respondent and I are the parents of the following children (state each child's name, age, date of birth and with whom the child now lives):

Name: First, Last	Age	DOB	Lives With

CIRCLE the visitation option that applies to you:

A. I request the following visitation schedule: _____

_____.

B. I request the Respondent have no visitation with the children because: _____

_____.